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A STUDY OF THE ADVERSE EFFECTS OF CHILDHOOD MALTREATMENT

by

KATIE A. KENNIE

A thesis, submitted in partial fulfillment of the requirements for the Honors in the Major Program in Psychology in the College of Sciences and in the Burnett Honors College at the University of Central Florida Orlando, Florida

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Thesis Chair: Dr. Steven Saunders
ABSTRACT

This study explores the link between the presence of childhood trauma and adult criminal behavior. In this study, four distinct categories of childhood trauma (physical abuse, sexual abuse, psychological abuse, and neglect) were examined. In addition, this study conducts a comparative analysis of the United States crime rate with that of Switzerland and Japan. This study examines and compares the policies utilized in ensuring the protection of child welfare. The ultimate goal is to provide research which may build a foundation that will assist in creating and improving policies which will ensure a child's psychological health.
DEDICATION

This thesis is dedicated first and foremost to all the victims of violent crime and their families. For my father, grandmother, and grandfather who have been a guiding light. And most especially, for my husband David Kennie without whom this would not have been possible.
ACKNOWLEDGEMENTS

I would like to express the upmost appreciation to all of those who helped to make my dream a reality. To my committee members, Dr. Karen Mottarella and Dr. Lin-Huff Corizine, thank you for your invaluable knowledge, assistance, and support throughout this journey. To my thesis chair Dr. Steven Saunders your faith and guidance made this thesis possible.
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CHAPTER 1: OVERVIEW

INTRODUCTION
A cycle of violence occurs in our society and impacts the welfare and future of our children (Fagan, 2005). Child maltreatment or abuse comes in multiple forms including psychological abuse, physical abuse, sexual abuse and neglect and is a global issue occurring across all races, cultures, economic, and educational levels. However, the issue of child maltreatment is more prevalent in the United States than many other countries despite multiple Child Protective Agencies (Fagan, 2005).

In order to thrive in the world, children need a safe and secure home where they are provided with unconditional love and support. However, for many children home is far from the safe haven it should be but rather a childhood of trauma is hidden behind closed doors. The bare essentials’ of food, water, clothing, and shelter are simply not enough for a child to thrive.

PURPOSE AND SIGNIFICANCE
The purpose of this thesis is to examine both the existence of risk factors for the maltreatment of children and how such abuse may impact an individual’s propensity for criminal activity. Child maltreatment has been shown to roughly double the likelihood that a youth will engage in criminal activity (Currie & Tekin, 2016).
CHAPTER 2: LITERATURE REVIEW

Strong correlations exist between the effects of childhood adversity and subsequent violent behavior (Akers, 1998). The existing effects of childhood trauma are real but their link to later violent behavior is questionable (Carlson & Cicchetti, 1997). If so, then is society in a position to prevent the crime from the start?

Between the years 2010 and 2011 approximately 7.6 million people were the victims of violence with an additional 1.1 million people who were victims of intimate partner violence or domestic violence in the United States (Milaniak & Widom, 2015). The Centers for Disease Control or (CDC) has reported that heart disease has appeared to be the biggest public health safety concern for Americans striking nearly 735,000 people every year and taking the lives of approximately 610,000 people annually. Perhaps, it is no longer heart disease which poses the biggest threat to Americans but rather the continued perpetration of violence both inside and outside of the home. A cycle of violence is affecting our society with toxic results.

According to the Department of Health and Human Services, approximately 680,000 children were the victims of reported child abuse and in less than half of those cases was treatment or counseling provided to the victims (Milaniak & Widom, 2015). The Child Maltreatment Report of 2010 showed that child neglect was at a staggering 78.3%, physical abuse 17.6%, sexual abuse 9.2%, and emotional abuse 8.1% (Luecken, Roubinov & Tanka,
In 2013, the American Psychological Association added childhood psychological abuse to the DSM-V. According to the DSM-V childhood psychological abuse is an intentional form of verbal or symbolic act of abuse against a child by a parent or caregiver, which has the possibility of causing psychological harm to the child. Children who have a history of childhood trauma are at an increased risk for developing multiple psychological disorders and a disorganized attachment style (Jacobvitz & Lyons-Ruth, 1999). The long-term effects upon the overall psychological functioning of individuals who were victims of childhood trauma require that counseling and treatment for victims of trauma are a necessity not a luxury (Golden & Prather, 2009).

The establishment of the effects of violence on children is a matter of understanding and recognizing the links between a childhood experience of violence as a victim and behavioral violence as a perpetrator (Greenwald, 2002). Beneath the violent and aggressive adult is an untreated, traumatized, and victimized child (Greenwald, 2002). Child maltreatment and exposure to community violence are common grounds for the criminal.

A biopsychosocial model of social development integrates both internal and external factors and how they affect brain development and influence social functioning skills (Luecken, Roubinov, Tanka, 2013). The bond between a parent and child is considered to be the most
significant and in some cases the most problematic. It is essential that a parent helps their child to navigate through the world independently while providing a nurturing environment that fosters a healthy sense of self-worth (Golden & Prather, 2009).

The ability to express and regulate emotions may be severely hindered when a child is subjected to abusive environments. Parents act as coaches to their children in promoting, modeling, and validating appropriate behavior (Luecken, Roubinov, Tanka, 2013). If there is a negative breakdown in this process, children may begin to exhibit signs of inappropriate behavior, which may be displayed in various forms of aggression, withdrawal, anxiety, depression, and impulsiveness (Golden & Prather, 2009).

A national sample of 3,472 adolescents revealed that child abuse increased the probability of participation in violent offenses as well as the frequency rate of offending (Burnier, et al., 2013). Adolescents were 3 times as likely to commit a violent offense. They engaged in an earlier onset of delinquent behavior, and demonstrated increased risk for involvement in the adult justice system in later years (Burnier et al., 2013). It seems that childhood trauma not only increases the risk that the victim will later become the victimizer, but also increases the risk that childhood abuse will then spread to the next generation.

Within Psychology, Albert Bandura’s social learning theory has become the forefront for the debate of the explanation of crime (Cochran, Jones, Sellers, Sullivan & Yarbrough, 2012). In a recent study, three main components, of crime were assessed including the definitions, peer associations, and reinforcement. Definitions are the evaluations of one’s own perception of their
behavior as positive, negative, or neutral (Cochran, et al., 2012). Peer association was analyzing the level of delinquency among each participant’s friends (Cochran et al., 2012). Reinforcements are the balance of rewards and punishments for a participant’s behavior (Cochran et al., 2012). All three related to an individual’s antisocial behavior (Cochran et al., 2012).

The foundation of social-learning theory suggests that parents and other custodial individuals serve as important models for appropriate behavior as well as antisocial or criminal behavior (Prather & Golden, 2010). The appearance of an intact family with a delinquent child has been suggested by some to negate the social-learning theory. However, the quality of the parent-child relationship must be considered not just the presence or absence of a two-parent household. When examining delinquent youth particularly those charged with violent criminal offenses there is a disproportionate number of them that suffered severe childhood abuse (Lewis, Mallouh, Webb, 1997).

Robert Agnew’s social-psychological strain theory is a sociological perspective on the effects of trauma during childhood. Social-psychological strain theory suggests a child exhibits emotions of anger, frustration, and resentment as a result of their abusive environments (Milaniak & Widom, 2015). Acts of violence and other criminal behavior are a consequence of their negative emotions (Milaniak & Widom, 2015).

Attachment theory similar to social control theory acknowledges the significance of the early parent-child bond. Both perspectives recognize that the ability to bond with others and the
development of social skills are critical factors in preventing violent behavior (Jensen & Howard, 1999). If the child fails to develop a healthy attachment bond to their parental figure early on, the consequences include severe psychosocial and interpersonal difficulties. (Berrick, Needell, Barth & Jonson-Reid, 1998). Psychosocial difficulties may result in an inability to empathize with others or an inability to regulate emotion during stress (Berrick et al., 1998).

Psychopathy is a word commonly used to characterize serious violent offenders. Offenders who are defined as being psychopathic may or may not be considered mentally incompetent though they are considered to suffer from a personality disorder. Psychopathy is defined by a constellation of behavioral characteristics such as emotional detachment, deceptiveness, manipulativeness, grandiosity, shallow effects, irresponsibility, impulsivity, parasitic lifestyle and a lack of empathy or remorse for their crimes combined with a ready desire to violate legal and social expectations (Schimmenti, Di Carlo, Passanisi, & Caretti, 2015).

Antisocial tendencies, interpersonal and affective factors are well embedded in the psychopathic lifestyle (Schimmenti et al., 2015). Childhood maltreatment is the most common form of child victimization linked with the development of antisocial personality disorder a key influence in the likelihood of exhibiting later psychopathic behavior (Schimmenti et al., 2015). As of 2006, national statistics revealed that 14.4% of all men in United States prisons and 36.7% of all women in prisons had long-standing histories of some form of child maltreatment (Prather & Golden, 2010).
Behavioral theory similar to the social learning theory is based on the premise that both normal and abnormal behavior is caused by learned experiences and the conditions set forth within those environments (Helfgott, 2013). Both operant conditioning and classical conditioning come together to form the behavioral theory. Operant conditioning, once referred to as Thorndike’s Law of Effect, was pioneered by Watson, Skinner and Thorndike. This type of conditioning involves use of both the rewards and punishments that influence behavior. Operant conditioning is based upon 5 basic processes including punishment, response cost, extinction, positive and negative reinforcement (Huitt & Hummel, 1997). The theory suggests that positive and negative reinforcement work to strengthen the particular behavior while punishment, response cost and extinction work to weaken and eventually extinguish the behavior (Huitt & Hummel, 1997). On the other hand, classical conditioning introduced by Pavlov focuses on how behavior is affected by the pairing of both psychological and physiological sensations or emotions with particular situations and events (Helfgott, 2013).

Early childhood trauma has been linked to long-term developmental consequences on both mental and physical levels. Adverse Childhood Experiences (ACE) including multiple forms of child abuse and neglect in adult mental health disorders significantly correlated with overall physical well-being (Herrenkohl, Hong, Kilka & Russso, 2012). Child abuse and neglect impacts the victim’s physical health with long term consequences. Retrospective studies find that victims of child abuse and neglect are at an increased risk for diabetes, hypertension, cardiovascular disease, and stroke (Herrenkohl et al., 2012). Chronic high levels of stress have
been shown to negatively impact the body’s immune system therefore putting the body at risk for certain illnesses and disease (Herrenkohl et al., 2012).

In the ACE study, children who experienced multiple forms of abuse were also at increased risk for both illicit substance abuse and alcohol abuse while growing up and into adulthood (Herrenkohl et al., 2012). While a 2008 longitudinal investigation, revealed that in comparison to men at age forty, forty year-old women who suffered similar childhood abuse were at increased risk for substance and alcohol abuse (Smith, 2008 as cited by Herrenkohl et al., 2012).

The theory of classical conditioning may be applied to the use and abuse of drugs and alcohol. For example, the euphoria created by use of the drugs may be considered the unconditioned stimulus while the certain locations, behavior, and individuals present during the euphoric state may be considered the conditioned stimulus (Helfgott, 2013). This same process may be applied to the development of other violent behaviors. For example, the sexual arousal that may be associated with violent fantasies or obtaining nonhuman objects may lead to a fetishistic behavior increasing crimes such as burglary or rape so that those feeling of sexual arousal can be obtained (Helfgott, 2013). The use and abuse of illicit drugs and alcohol dependence increases the likelihood of committing violent criminal offenses.

The American Judicial System holds individuals accountable for their actions when those actions violate the law (Fagan, 2005). Evaluations of competency to stand trial, also known as fitness to stand trial, are often necessary to determine if a defendant has the ability to understand
the proceedings and assist in their own defense. The American Psychological Association determined that childhood trauma impacts the long-term mental competency of an individual (Carlson & Cicchetti, 1997). The unfortunate prevalence of childhood abuse and neglect in the United States makes it a significant part of overall crime prevention in society.

CHAPTER 3: ANALYZING THE QUALATATIVE STUDY

METHOD

For this research, 25 case files from the work of licensed clinical psychologist Dr. Saunders were selected for analysis. Individuals in these cases vary in both race and gender, and range in age. From 18 to 54, with an average age of 37. First, each of the 25 individual cases, was examined for basic demographic including race, gender and age. Secondly, family background information was gained when available. This included whether the individual was raised in a two-parent households, raised by biological parents, and the number of siblings in the home. Thirdly, the educational background of parents and the individual was obtained through the case information. Next, the case histories in the clinical files were reviewed for the presence of a history of childhood maltreatment. With the term child maltreatment encompassing multiple forms, each form of abuse, psychological, physical, sexual, and neglect was noted. Because the focus was to specifically address the impact of child maltreatment on an
individual’s propensity for subsequent criminal behavior, the presence of a criminal background including both violent and non-violent offenses, was also noted for each individual.

The case files used in this study were selected through an informal screening process attempting to diversify the participants’ experiences. The sample was a convenience sample purposely biased to select subjects who had been arrested and documentation of mental competency was required. While this type of sampling did not yield a completely random sample, the goal was to explore information that will encourage future research addressing the impact of child maltreatment on crime prevention.

RESULTS

Of the 25 cases used in this study, 16 were found to be mentally competent to stand trial and address the charges against them. It is important to note that though these 16 patients were found to be mentally competent that did not exclude mental illness altogether but only found that they were competent to stand trial. A total of 9 patients were deemed mentally incompetent to stand trial as illustrated in Graph 3A.
Of the 16 patients, who were found to be mentally competent to stand trial, 3 maintained that they had never been a victim of any form of child maltreatment while 13 patients suffered at least one form of child maltreatment. All 13 patients suffered neglect, 2 suffered sexual abuse, 7 suffered physical abuse, 4 suffered psychological abuse as illustrated in Graph 3B.
Of the 9 patients who were deemed mentally incompetent to stand trial 7 described instances of child maltreatment while 2 patients were unable to respond to this question. Of the 7 patients who did describe instances of child maltreatment, 5 suffered neglect, 1 suffered sexual
abuse, 6 suffered physical abuse, 5 suffered psychological abuse as illustrated in Graph 3C.

Parental characteristics have shown to increase the likelihood of child maltreatment. In particular, the age of the mother. The median age of the mother for the 25 patients reviewed was 17.3 years old as illustrated in Graph 3D.
The level of education for parents has shown to be a significant factor in determining the likelihood for child maltreatment. In part, the level of education or lack thereof may put a family at risk for low economic status. Of the 25 patients reviewed, the parental education of one or
both parents when applicable is 52% with a high school diploma or equivalent, 32% with no high school diploma or equivalent and 16% with some form of a college degree as illustrated in Graph 3E.

The race of an individual has been a highly debatable topic when addressing the prevalence of child maltreatment. Many believe that minorities are at a higher risk for abuse and
neglect though research has indicated otherwise. Of the 25 patients reviewed, 12% were Hispanic, 56% were Caucasian and 32% were African American as illustrated in Graph 3F.

All 25 patients had a criminal background as they were all referred by the court to determine competency to stand trial for a pending charge. The extent of the criminal backgrounds among each patient varied in both violent and non-violent crimes.

LIMITATIONS

With the utilization of a convenience sample, some issues did arise. Specifically, location was a concern since all 25 subjects came from the case files of Dr. Saunders whose
practice is located in Lake County, FL. With all subjects residing in Lake County, Florida the implications of area were unable to be fully addressed. In addition, the sample was problematic because all subjects were referred due to a pending criminal charge which created several biases early on. The first being an increased likelihood that the subject had a criminal background since the referral was based on a pending criminal charge. In addition, most information was self-reported therefore creating the possibility of inaccuracies within the data.

Also, the memory of older subjects may have been affected by the passage of time. The older participants may have suffered from memory bias though most did provide descriptive background information. The prevalence of psychiatric disorders among the subjects was at times problematic in obtaining the necessary information.
CHAPTER 4: UNITED STATES POLICY

CHILD WELFARE

What happens when parents fail to protect their children? Unfortunately, parents do sometimes fail to protect, provide, and guide their children. Just as there are laws in place to protect citizens from violent and non-violent crimes there are laws and policies to protect children as well. The “Children’s Charter” enacted in 1889, was the first act of parliament which protected children from cruelty and allowed intervention between parent and child relations (Child Welfare Information Gateway, 2016). In 1894, the Children’s Charter extended the protection and recognized mental cruelty, now referred to as, psychological abuse also allowed for children to provide testimony in court of abuse (Child Welfare Information Gateway, 2016).

It was the Child Protection and Treatment Act of 1974 which allowed the implementation of many laws and policies to safeguard child welfare though many programs vary at the state level (Child Welfare Information Gateway, 2016). The Children Act of 1989, gave every child the right to be free from all forms of abuse and exploitation, and the right to safeguard their own welfare (Child Welfare Information Gateway, 2016). The primary philosophy of this act revolved around the idea that all children are best brought up within their families by their parents (Arthur, 2007). However, despite the acknowledgement that the primary responsibility should lie with the parents, it encouraged state and local agencies to provide family support assistance (Arthur, 2007). Family support services included financial assistance, advice,
guidance to promote parenting skills, counseling to improve family dynamics, and traveling accommodations to obtain those services (Arthur, 2007).

Despite the multiple family support resources that are available to assist in improving the family unit, unfortunately, many families choose not to utilize those resources. In such cases, where an individual suspects abuse whether a neighbor, teacher or doctor, it is important that authorities are contacted. Once a report of suspected child abuse or neglect is made, an investigation is opened within 24 hours; though this process does vary slightly from state to state (Child Welfare, 2006). Child Protective Services has approximately 30 days to complete an investigation into suspected child maltreatment (Child Welfare, 2006).

During an investigation into child maltreatment, Child Protective Services may complete interviews with the parents and child, as well as with anyone who may have regular contact with the family (Child Welfare, 2006). The home of the child is viewed as are case related records including police, medical, and school reports (Child Welfare, 2006). Multiple factors are considered when doing a thorough review of the case and the disposition of the case resets upon the preponderance of evidence. Though Child Protective Services may remove the child from the home if they consider danger to be imminent, a Judge has the final decision which may or may not concur with the finding of CPS.

Once a child is removed from the home, that child is placed with another relative or foster parents who have been previously approved by CPS. However, sometimes a relative or foster family is not available or willing to care for the child and so the child is placed in a group
home (Child Welfare, 2006). The ultimate goal whenever possible is to keep families together so children are often returned to their homes if conditions set forth by the court are met and it is determined that the child will be in a safe environment.

JUVENILLE JUSTICE

What distinguishes a child from an adult? In the eyes of our American society, the role of the child versus the adult are considered to be well defined, but it seems the roles are evolving especially in the justice system. Children, usually between 0-12 years of age are defined as those who still need to be fully cared for and supervised by a parent or adult (Kratcoski, P. & Kratcoski, L., 1996). The teenager or adolescent is between 13-17 years of age and are usually considered to be in a period of transition between childhood and adulthood. Although they are becoming more independent, they are still considered to be under the control of their parents (Kratcoski, P. & Kratcoski, L., 1996). Unlike children and adolescents, adults are considered to fully capable of providing for themselves and responsible for their actions and behaviors. Within the eyes of the law, this level of responsibility usually begins at 18 years of age.

In the United States each year, thousands of children and adolescents commit lethal violence; while half of these acts are homicide, the other half is suicide (Center for Disease Control and Prevention, 1998). The increasing number of children and adolescents committing lethal violence has constituted a crisis within our society. Since 1956, there has been a seven-
fold increase per capita in aggravated assault rates among adolescents within the United States (U.S. Bureau of Investigation, 1997).

Within the United States, property crimes including theft and vandalism have been the most common crimes committed by adolescents and rates have remained stable through the years (Snyder, 1998). However, the arrest rates for violent crimes among adolescents has been increasing 68% between 1987 and 1994 (Snyder, 1998). By 1994, the arrest rates for violent crimes including forcible rape, robbery, aggravated assault and murder among adolescents has increased 43% resulting in more than 500 per 100,000 adolescents being arrested (Snyder, 1998). Arrest rates for forcible rape, robbery, and aggravated assault have been steadily increasing since the early 1990’s; while murder rates have declined 40% between 1993 and 1997 but still have seen a 21% increase from 1987 (Snyder, 1998).

The term juvenile delinquent is commonly used to describe an adolescent or teenager, who has committed violent or non-violent crimes (Kratcoski, P. & Kratcoski, L., 1996). The establishment of the juvenile court system occurred in the mid-nineteenth century before which juveniles were housed, tried, and sentenced as adults (Kratcoski, P. & Kratcoski., 1996). The juvenile court, works to recognize the difference between child or adolescent and adult basically acting as a “benevolent parent” safeguarding the well being of children (Kratcoski, P. & Kratcoski, L., 1996). Despite the establishment of the juvenile court system, children are being tried as adults and being incarcerated correspondingly (Greenwald, 2002).
With the end of the twentieth century, has come the realization that juvenile violence is on the rise. The disturbing nature of violent crimes being committed by children has brought forth the notion that society needs a change in the treatment and punishment of children who are becoming the victimizers.

CHAPTER 5: RISK FACTORS FOR CHILD MALTREATMENT

POVERTY

Though no child is exempt from abuse there are certain risk factors that increase the probability of child victimization. Studies have shown strong associations between poverty and both child victimization and juvenile delinquency. Child neglect is the most prevalent form of child maltreatment in the United States (Berrick, Needell, Barth & Jonson-Reid, 1998). In the third National Incidence Study of Child Abuse and Neglect, families with annual family income below $15,000 were more than 22 times likely to suffer from some form of child maltreatment than those with an annual income above $30,000 (Sedlak & Broadhurst, 1996).

Years ago, poverty was identified as a primary factor in the cause of high delinquency rates, social disorganization, and overall weak social control (Shaw & McKay, 1942). Further
studies support the association between families living in poverty and victimization. In Chicago, assault and homicide rates were significantly higher in poverty ridden areas while similar areas have supported such increases (Block, 1979). Adolescents are more likely to carry a weapon in metropolitan areas in which social control and social disorganization are more prevalent, creating an increased likelihood that an altercation may end in violence (Lowry, Powell, Kann, Collins, Kolbe, 1998). Adolescents had a 49% annual rate of engaging in a physical fight while 17% of adolescents report carrying a deadly weapon (Lowry et al., 1998). Unfortunately, this is a dangerous and often deadly combination.

In addition, poverty creates other parental stressors such as unemployment, lack of social support and access to resources which may affect the quality of the relationship between parent and child. Families below the poverty threshold are predominately single-parent households (Sedlak & Broadhurst, 1996). Single parents living below the poverty threshold are often forced to work multiple jobs just to make ends meet therefore placing a child in an environment in which neglect though unintentional is a frequent occurrence. The parent-child relationship suffers and in more severe cases children may be removed from the home by Child Welfare creating a situation in which the child is placed into the system (Child Welfare, 2006).

PARENTAL CHARACTERISTICS

The characteristics of a parent or caregiver may place a child at risk for child maltreatment. Primary characteristics of a parent or caregiver such as age, education level, unwanted pregnancy, and a history of abuse may all contribute to an increased risk for child
maltreatment. Children born to adolescent mothers are at an increased risk for child maltreatment (Dukewich, Borkowski & Whitman, 1996). Studies have shown that between 36% and 51% of all maltreated children were born to adolescent mothers (Dukewich et al., 1996).

The educational level of parents can affect parental awareness of appropriate family management techniques and proper disciplinary practices (McCord, 1979). Aggressive and authoritarian practices are just as detrimental as passive and inconsistent parenting (McCord, 1979). Furthermore, lack of education increases the likelihood of poverty which introduces further stressors. However, a parent or caregiver who suffered child maltreatment themselves may fall into the same cycle despite their age, educational level, or even their desire to be a parent.

SUBSTANCE AND ALCOHOL ABUSE

Drug and alcohol abuse by parents has serious consequences. Substance abuse is strongly associated with at least one form of child maltreatment (Walsh, MacMillian & Jamieson, 2003). The rates of physical abuse, sexual abuse, psychological abuse and neglect are more prevalent among parents who report substance abuse (Walsh et al., 2003). Between 50% and 80% of families in the child welfare system exhibit substance and/or alcohol abuse (Walsh et al., 2003). Social workers continuously note parental alcohol and substance abuse as a cause for concern (Child Welfare, 2006). Substance abuse is a top concern among families who were reported for maltreatment (Walsh et al., 2003).
CHAPTER 6: ECONOMIC CONSEQUENCES

Child maltreatment has grown to be a prevalent public health and safety concern with approximately 3.3 million reported cases occurring in 2008 alone; and of those, an estimated 772,000 were verified by Child Protective Services (USDHHS, 2010). The adverse consequences of child maltreatment are both long and short term in nature (Fang, Brown, Florence & Mercy, 2012). Long term health, behavioral, social and economic consequences may carry a significant
national burden (Fang et al., 2012). In 2006, states spent an estimated $25.7 billion on federal, state and local funds for child welfare related activities including Child Protective Service investigations (Fang et al., 2012).

The average lifetime cost of nonfatal child maltreatment is $210,012 per child (Fang et al., 2012). The breakdown of nonfatal child maltreatment is $32,648 in childhood health care costs, $10,530 in adulthood medical costs, $144,360 in productivity costs, $7,728 in child welfare costs, $6,647 in criminal justice costs, $7,799 in special education costs (Fang et al., 2012). For fatal child maltreatment, the average lifetime cost per death is $1,272,900 (Fang et al., 2012). The breakdown of fatal child maltreatment cost includes $14,100 in medical costs and $1,258,800 in loss of productivity (Fang et al., 2012).

There are an estimated 579,000 newly verified cases of nonfatal child maltreatment and 1,740 cases of fatal child maltreatment in the United States each year (Fang et al., 2012). When compared to other health concerns the $124 billion dollar economic burden from child maltreatment for the United States is substantial (Fang et al., 2012). Though the implementation of effective preventive and responsive programs is costly, the benefits are significant (Fang et al., 2012).
CHAPTER 7: COMPARATIVE ANALYSIS
Child maltreatment has proven to be a global issue occurring in every country, even those of significant wealth and resources (Adamson, Brown, Micklewrights, Schnepf, and Wright, 2000). Within industrialized countries nearly 3,500 children die every year as a direct result of child maltreatment (Adamson, 2000). Germany and the United Kingdom report an estimated 2 deaths per week as a result of child maltreatment. France has 3; Japan has 4; and the United States has a staggering 27 (Adamson et al., 2000). The risk of death by child maltreatment is greatest between the ages of 1 to 4 years old (Adamson et al., 2000).

Spain, Greece, Italy, Ireland, and Norway are among the countries which have the lowest incidence of child maltreatment deaths (Adamson et al., 2000). Belgium, New Zealand, Hungary, and France have incidences of child maltreatment deaths which are 4 to 6 times higher than average (Adamson et al., 2000). The United States, Mexico, and Portugal have alarming rates of child maltreatment deaths that are between 10 to 15 times higher than the national average (Adamson et al., 2000).

Countries with the lowest incidence of child maltreatment deaths also held the lowest incidences of adult deaths by violent means (Adamson et al., 2000). Unfortunately, the United States, Mexico, and Portugal not only hold the highest incidence of child maltreatment deaths, but also the highest incidence of adult deaths by violent means (Adamson et al., 2000). The physical punishment of children has been utilized in all countries, but in recent times industrialized countries have come to prohibit harsh physical discipline against children (Adamson et al., 2000).
CHAPTER 8: CONCLUSIONS

The existence of childhood maltreatment in both the United States and other industrialized countries is becoming more evident. Great emphasis has been placed upon both the cultural and economic backgrounds of parents however, research has indicated that children of all ages from all backgrounds may become the victim of both abuse and neglect. Though certain parental characteristics such as a teenage mother without a high school education has been shown to increase the likelihood of subsequent abuse and neglect it is by no means a certainty. In contrast, a mature mother with a college education is not a guarantee that abuse and neglect will not occur. Parental characteristics such as age and education have shown to be a more concerning factor than race, religion, and cultural backgrounds combined.

Despite the multiple protective organizations available in the United States childhood maltreatment has become a prevalent health and safety concern. It has become apparent that although addressing the immediate welfare of a child is a necessary component of child safety it is not enough. The adverse effects of child abuse and neglect continue well into adulthood.

Great discussion and debate, has been placed upon the “Cycle of Abuse.” However, such a theory bears the question, why do some victims of child maltreatment turn to violence while others do not? Children who have suffered abuse and neglect have shown to have severe psychological consequences often precipitating their destructive and violent behavior. Destructive behavioral consequences including drug and alcohol abuse which only perpetuates psychological disorders and violent behavior. The removal of a child from an abusive and
neglectful environment is a key component in child protection but, it is only a step in the process of truly ensuring a child’s future. The importance of food and shelter has overshadowed the psychological and emotional needs of a child.

The future of our world is dependent upon our children. Though entrusted to their parents a child’s welfare both physical and psychological is the responsibility of every individual. As a society, we must work together for our children to not just survive but to thrive.
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